



G2-29338

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10/3/96
B
700

For Ecology Use

Fee Paid 12/1/96

Date

State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Kelly Crest Water System Home Tel: (360) 423 - 9454
Mailing Address c/o Charlie Fullbright / 3530 Old 99 South Work Tel: (360) 636 - 8063
City Kelso State WA Zip+4 98626 + FAX: (360) 423 - 9020

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Patrick Tanner / Wallis Engineering Home Tel: (503) 452 - 9323
Mailing Address 119 E. 8th Street Work Tel: (360) 695 - 7041
City Vancouver State WA Zip+4 98661 + FAX: (360) 694 - 1043
Relationship to applicant Consulting Engineer

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 6 (☐ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s) of multiple domestic use. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 4.5

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From / / to / /

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for <u> </u> well(s).		
Number of diversions: <u> </u>								
Source flows into (name of body of water):						Size & depth of well(s): <u>6" ϕ 445' deep</u>		
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>1400' S 1,850' E NW Corner Sec. 30</u>								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is plotted, complete below:		
						Lot	Block	Subdivision
SE	NW	36	7N	1W	Cowlitz	12		Kelley Crest
For Ecology Use: Date Received: <u>12-6-95</u> Priority Date: <u>12-6-95</u>								
SEPA: <u>Exempt</u> /Not Exempt FERC License # <u> </u> Dept. Of Health # <u> </u>								
Date Accepted As Complete: <u>11/8/96</u> By: <u>SC</u> Date Returned: <u> </u> By: <u> </u> WRIA: <u>27</u>								

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Kelly Crest (DOH ID # 29441P)
- B. Briefly describe your proposed water system. (See instructions.)
Existing System Facilities: 3 wells - #1 1.5 HP Water Right GZ-26664C
(well logs + pump tests attached) #2 1.0 HP
#3 1.0 HP
Water Storage 6,000 gallons, 2 booster pumps (2 HP), pressure tanks, distribution system
with 3,500 LF of 2"-3" pipes, 2 active residential services, 4 planned services, 2 future
services.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 26 Type of connection homes
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by
your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? See below ☐ YES ☒ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? See below ☐ YES ☒ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
- Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
 - Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

- 6C. This new Group A water system has been formed from 3 separate Group B systems (Kelly Crest #29441 P, Snowbird #63914V, unnamed) corresponding to wells #1, 2, 3, respectively. Their consolidation was prompted by the inadequacy of the separate systems to reliably provide water service. This process has been completed with regulatory review and support provided by the Cowlitz County Health Department which has primacy over Group A systems serving up to 50 connections. Limited communications were also maintained with DOT. A comprehensive Water System Plan was not considered essential for this process. An engineering report was prepared and accepted by the County. Construction documents were also prepared and approved. Copies of both are enclosed.
- 6D. The system has not completed a water conservation plan but has installed source meters on each well, system meters for booster pumping and water transfers, and individual service meters. A new metered water rate structure is being prepared for submittal to the UTC. One of the key elements of this structure will be commodity charges which encourage efficient water use.

We are returning your application for the following reason(s):		
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
incomplete		
Explanation: <u>Signature</u>		
Please provide the additional information requested above and return your application by <u>1/8/96</u> (date).		

Ecology staff Shen Fox Date 12/8/95

all lots within Phase 1, 2, 3 of the Kelly Crest Subdivision located on Mountain View Rd Kalama, wa being within SEC. 36 T 7 N R 1 W.

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From Kelso, WA: South on I-5 to Kalama River Road exit; east along Kalama River Road approx. 4.7 miles; turn left onto Mountain View Road for approx. 2.7 miles to entrance of Kelley Crest subdivision (entrance clearly marked)

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

See attached construction documents

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

The applicant is the local water purveyor.

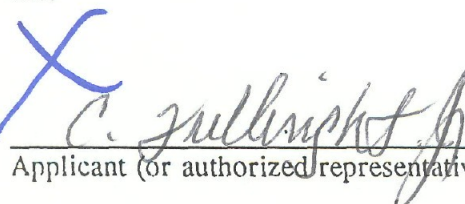
B. Does the applicant own the land on which the water source is located?


☐ YES ☒ NO

If no, submit a copy of agreement:

Easements attached.

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.


Applicant (or authorized representative)

 12/16/95
Date

Landowner for place of use (if same as applicant, write "same")

Date